

Sahrita Holum
Child Protection Specialist
2300 12th Ave. S. Suite 211
Great Falls, Mt 59405

Testimony to the Joint Human Services Appropriation Subcommittee
02/05/2009

A Day in the Life of a Child Protection Specialist Outline

Average workload 8-11 ongoing cases (including Voluntary Protective Service Agreements)

Average of 10-15 open investigation reports at anytime

Average 12-18 children on case load

Must balance both investigations and on-going cases by prioritizing biggest safety threats to the child

- Once reports are assigned, must prioritize based on safety threats (allegations), child's age/ protective capacity, history. Infant with broken bones is higher than a teenager living in a dirty home
- Priority Ones 24 hours to initiate
- Child Protection Services reports -14 days to initiate investigation- on Average 24-72 hours before initiated
- **Before investigation is initiated**
 - o Review the history
 - o Look up any criminal history on adults in the home
 - o Contact probation officer- Probation Officers can assist with on the spot urine analysis and unannounced home visits. They also have the right to search the home.
 - o Determine who is in the household. One can ask for assistance from the Office of Public Assistance.
 - o If drug allegation- One should contact the local narcotic division. Most of the time there is an open investigation and we can assist local law enforcement.
 - o If allegation is against a military member, one needs to contact Family Advocacy Department on base. First sergeants and commanders can assist with unannounced home visits. The military can offer services available to military personnel only.
 - o If report is from the hospital, one must speak to hospital social worker on progress of child, concerns regarding parents and develop a plan using the agreement between the department and hospital on approaching parents in the hospital and if necessary removal protocol.

Initiating investigation- Continually assessing safety of child. Parents have a fundamental right to parent. One must conduct a thorough investigation in a reasonable amount of time while not jeopardizing child's safety.

- Interview the verbal children in the home, preferably at school or daycare.
- Visually view the child, assess any marks such as bruising, burns, broken bones, welts – if suspicious in nature call a pediatrician and have child seen immediately by trained medical personnel.
- Assess safety based on child disclosure, medical conclusions, parent statements, household environment and staffing with supervisor.
- See if concerns could be resolved and avoid removal by utilizing:
 - a safety agreement
 - referrals to mental health
 - referrals to chemical dependency treatment
 - referrals to Office of Public Assistance
 - placing family on Voluntary Protective Service Agreement to provide services
 - Utilize Family Group Decision Making meetings to bring extended family and support into place and on the same page.
- If removal is in best interest of child one must provide the Notification to Parent and explain why removal is taking place
 - Staff with Supervisor, county attorney or Child Protection Unit attorney
 - Gather information on extended family placements
 - Gather information on children – allergies, behavioral issues, school information
 - Find a concurrent placement as soon as possible
 - Place child in placement with needed supplies- diapers, formula, clothes
 - Assist foster family in obtaining Family Only Grant (kinship placements)
 - Refer kinship foster placements to licensing
 - If child is under 3, refer child to Quality of Life Concepts for developmental evaluation
 - Set up services for children- such as therapy, medical, school
 - Set up visitations for parents and children
- Affidavit must be completed within 48 hours of removal- staff with supervisor, county attorney, or Child Protection Unit attorney and file for either Temporary Investigative Authority (90 days) or Temporary Legal Custody (6 months)
 - Must have a separate affidavit for each child, with specifics for birth parents. This must include diligent search for birthparents/ non-custodial parents.
 - Write current situation, parent statements/ admissions, history, if an Indian child; notify tribe. End with conclusion of safety threat to child.
 - Compile witness list

- Meet with parents
 - o Discuss and fill out paper work. Provide What Happens Next booklet, discuss court proceedings, visitation expectations, fill out necessary case paper work. Depending on why you removed, some parents may need immediate medical or mental health attention.
 - o Discuss Family Group Decision Making meetings, involve support network, and immediately begin working with families.
 - o Provide a copy of your initial affidavit and explain the departments concerns and reasoning for intervention
- Finish investigation
 - o Write Investigation Safety assessment (ISA)
 - o Write any substantiation letters
 - o Close report
- **Begin On-Going Case Work**
 - o Keep track of court dates for each case
 - Show cause hearing- initial hearing to adjudicate the youth as a youth in need of care. One presents their case and why the state is intervening.
 - Dispositional hearing- treatment plans court ordered
 - Status hearings
 - Review hearing – make a determination to extend Temporary Legal Custody or file for Permanent Legal Custody
 - Permanency hearings- Affidavit now includes a section on child's preference for placement
 - o Children in care –
 - need to schedule a well-check
 - counseling
 - stabilize the placement
 - developmental assessment- may need physical therapy, speech therapy
 - may need to change schools, set up daycare
 - transfer Woman and Infant Child benefits to family members or foster placement
 - o Parents- formulate a treatment plan that addresses the concerns and reasons for removal. A good technique is to include parents and listen to their needs.
 - Treatment Plan could include:
 - Chemical dependency treatment, anger management, parenting classes/ assessment, individual therapy, marriage counseling, random urine analysis and breathalyzers, mental health assessment, psychological

evaluation, family based services, domestic violence treatment and support groups.

- All services need referrals by Child Protection Specialist.
 - If parent is incarcerated, it is best practice, to determine what services he or she can begin while incarcerated. Most prisons offer counseling, drug treatment, and parenting classes.
 - Work hand in hand with probation/ parole officer.
 - Maintain communication with all service providers.
 - At any point in every case, Child Protection Specialist worker has weekly contact with various services providers such as:
 - Chemical dependency counselors
 - Therapist for parents and children
 - Group counselors – outpatient treatment, Dialectical Behavioral Therapy
 - Pediatricians
 - Family based service providers
 - CASA (Court Appointed Special Advocate)
 - Parent attorneys
 - Childs attorneys
 - Supervisors of visitation
 - School counselors
 - Tribal social services
 - Foster parents/ kinship placements
 - School teachers
 - Children's case managers
 - Adult case managers
 - Group home therapist/ counselors- treatment team members
- Tools used to continually assess safety concerns of child being placed outside of home, if at anytime the safety factors are reduced to a low level a trial home visit may be initiated.
- Foster Care Review Committee
 - Permanency Team
 - Staffing w/ supervisor
 - Reunification safety assessment
 - Family Group Decision Making Meetings
 - Safety assessment for case closure
 - Stabilization Plans

- You could have filed for Temporary Legal Custody on one day and begin working on your adoption paper work and participating in selection committee for another case the next day.
-
-
- At anytime on cases there may be; a placement breakdown, foster child runaway, new allegations or concern arise in therapy, parents relapsing, parents incarcerated, additional reports to investigate, children may need rides to visits/ Dr. appointment, medications need to be filled, paper work needs to be signed at schools etc.
- A priority one may take an entire afternoon or day to sort out and handle appropriately. Thus, pushing back everything scheduled for that day to another time. Then you have to reschedule with busy service providers or foster parents.
- A lot of assistance from other Child Protection Specialist workers and team work is essential to ones case being successfully ran.
- New changes such as a Child Protection Unit Attorney General in the office make staffing and legal questions easier.
- Emphasis on face to face child contact in the home builds relationships with children and foster families. Needs of child can be closely monitored.
- Emphasis on locating the non-custodial parent and involving them in the child's life has been beneficial
- Emphasis on family centered practice and involving the extended family throughout the case has help motivate and support the parent.
- Our main priority is reunification with birth parent, and keeping children safe.

Case Examples to use:

- 1 week old with spiral arm fracture of humerus
- 3 teenage girls sexual abuse against step-father
- 6 month old with 2nd degree burns, bite marks, concussion